Fill	in this info	rmation to identify your	case:			
Deb	otor 1		O ESTELA RIVERA			
Deh	otor 2	First Name	Middle Name	Last Name		
1 -	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States B	Sankruptcy Court for the:	DISTRICT OF PUERTO F	RICO		
Cas	e number	17-03133-BKT				
(if kn					_	k if this is an
					amen	ded filing
Of:	ficial Fo	orm 106Sum				
Su	mmary	of Your Assets	and Liabilities and	d Certain Statistical Informatio	n	12/15
				re filing together, both are equally responsibl information on this form. If you are filing ame		
				the box at the top of this page.		di inc
Part	1: Sumi	marize Your Assets				
					Your a	ssets
						of what you own
1.		A/B: Property (Official F			•	400 000 00
	1a. Copy I	ine 55, Total real estate, f	rom Schedule A/B		\$	109,000.00
	1b. Copy I	ine 62, Total personal pro	perty, from Schedule A/B		\$	27,887.88
	1c. Copy li	ine 63, Total of all propert	y on Schedule A/B		\$	136,887.88
Part	2: Sumi	marize Your Liabilities				
					Your li	abilities
						t you owe
2.			laims Secured by Property (. ф	140,956.91
	2a. Copy t	the total you listed in Colu	mn A, <i>Amount of claim,</i> at th	e bottom of the last page of Part 1 of Schedule D) \$	140,930.91
3.			Unsecured Claims (Official F 1 (priority unsecured claims)	Form 106E/F)) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy	the total claims from Part	2 (nonpriority unsecured cla	ims) from line 6j of Schedule E/F	\$	3,240.83
	1,7		` ' '	,		
				Your total liabilit	ies \$	144,197.74
						<u> </u>
Part	3: Sumi	marize Your Income and	I Expenses			
4.	Schedule	I: Your Income (Official Fo	orm 106I)			
					\$	1,150.22
5.		J: Your Expenses (Officia			Φ.	2,263.00
	Copy your	monthly expenses from li	ine 22c of Schedule J		\$	2,203.00
Part	4: Ansv	ver These Questions for	Administrative and Statis	tical Records		
6.	-	• • •	er Chapters 7, 11, or 13?			
	☐ No. Y	ou have nothing to report	t on this part of the form. Che	eck this box and submit this form to the court with	your other sc	nedules.
	■ Yes					

- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this inf	ormation to identify yo	ur case and thi					
Debtor 1	OSCAR ORLAN	NDO ESTELA Middle		Last Name			
Debtor 2	i iist ivaille	Middle	Name	Last Name			
(Spouse, if filing)	First Name	Middle	Name	Last Name			
United States	Bankruptcy Court for the	E: DISTRICT C	OF PUERTO RIC	0			
Case number	17-03133-BKT						☐ Check if this is an amended filing
	orm 106A/B ale A/B: Pro	nerty					4245
		<u>. </u>	n accet only once	. If an asset fits in more than o	no ootogony lie	t the seest in t	12/15
		ing, Land, or Oth					
. Do you own o				ding, land, or similar property?			
. Do you own on No. Go to Yes. Whee	Part 2.	ble interest in ar	what is the pro	ding, land, or similar property? perty? Check all that apply mily home r multi-unit building nium or cooperative	the amount	of any secured	ims or exemptions. Put I claims on Schedule D: as Secured by Property.
. Do you own on No. Go to Yes. Whee	Part 2. re is the property? DRINQUEN VALLEY LLE YUYO ess, if available, or other descript	ble interest in ar	What is the property of the pr	perty? Check all that apply mily home r multi-unit building	Current valentire prop	of any secured tho Have Claim ue of the	Current value of the portion you own?
. Do you own on the No. Go to Yes. Whee 1.1 URB BG 445 CA Street addre	Part 2. re is the property? PRINQUEN VALLEY LLE YUYO ess, if available, or other descript	II	What is the pro Single-far Duplex or Condomin Manufact Land Investmen Investmen Other Who has an inter	perty? Check all that apply mily home r multi-unit building nium or cooperative cured or mobile home nt property re	Current val entire prop \$10 Describe th (such as fe	of any secured the Have Claim use of the erty? 9,000.00 ne nature of you	I claims on Schedule D: as Secured by Property. Current value of the
. Do you own on the No. Go to Yes. Whee 1.1 URB BG 445 CA Street addre	Part 2. re is the property? DRINQUEN VALLEY LLE YUYO ess, if available, or other descript B PR 0 State	II	What is the pro Single-far Duplex or Condomin Manufact Land Investmen Timeshar Other	perty? Check all that apply mily home r multi-unit building nium or cooperative rured or mobile home nt property re erest in the property? Check one only	Current val entire prop \$10 Describe th (such as fe	of any secured the Have Claim use of the erty? 19,000.00 10 ne nature of your simple, tena	Current value of the portion you own? \$109,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

De	btor 1 C	SCAR ORLAND	O ESTELA R	RIVERA	Case number (if known)	17-03133-BKT
3. (Cars, vans,	trucks, tractors,	sport utility vel	hicles, motorcycles		
Г	□No					
_	■ Yes					
	- res					
3	.1 Make:	TOY0TA		Who has an interest in the property? Check one		cured claims or exemptions. Put
3.1		COROLLA		_		secured claims on Schedule D: ve Claims Secured by Property.
	Model: Year:	1997		Debtor 1 only		
		nate mileage:	200000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
		ormation:	200000	☐ At least one of the debtors and another	citile property.	portion you own.
		NO AIR, NO RAI	DIO. NO	Actions one of the deptors and another		
	1 '	DDY DAMAGE, I		☐ Check if this is community property	\$321	.00 \$321.00
	FAIR			(see instructions)		
5	Examples: B No Yes Add the do	oats, trailers, moto	rs, personal wa	d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcy in for all of your entries from Part 2, including that number here	cle accessories	\$321.00
	.pages you	nave attached for	r Part 2. Write t	mat number nere	=>	
Pai	rt 3: Descri	be Your Personal an	nd Household Ite	oms.		
Do	you own o	or have any legal o	or equitable int	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
				china, kitchenware		
	— 100. D0					
		ref.	, stove, wash	ner, bedrm set, 36 in flat screen tv, air o	condiitoner	\$3,000.00
	_	Televisions and rad		eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music c	ollections; electronic devices
	■ No					
	☐ Yes. De	scribe				
	_			prints, or other artwork; books, pictures, or othe llectibles	er art objects; stamp, coin	or baseball card collections;
	■ No					
	☐ Yes. De	SCRIDE				
	Examples:	for sports and ho Sports, photograph musical instrument	nic, exercise, an	d other hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes	and kayaks; carpentry tools;
	☐ Yes. De	scribe				
	Firearms Examples ■ No □ Yes. De		tguns, ammunit	ion, and related equipment		
	<u> </u>	00.100				

De	btor 1	OSCAR OF	RLANDO	ESTELA RIVERA	C:	ase number (if known)	17-03133-BKT
	Clothes Examp □ No		clothes, fur	s, leather coats, desi	gner wear, shoes, accessories		
		Describe					
	_ 100.	D0001100				1	
			clothi	ng			\$500.00
	■ No		jewelry, co:	stume jewelry, engag	ement rings, wedding rings, heirloom jew	elry, watches, gems, g	old, silver
13.	Non-fai Examp ■ No	rm animals bles: Dogs, cats	s, birds, hoi	rses			
14.	Any otl ■ No				not already list, including any health aid	ds you did not list	
	□ 163.	Oive specific i	TIIOTTI ALIOTI.			ı	
15					ort 3, including any entries for pages yo	ou have attached	\$3,500.00
Pai	rt 4: Des	scribe Your Fina	ancial Asset	s			
					any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No			our wallet, in your ho	me, in a safe deposit box, and on hand wh	hen you file your petition	on
					unts; certificates of deposit; shares in cred with the same institution, list each.	dit unions, brokerage h	nouses, and other similar
					Institution name:		
			17.1.	CH ACCT	BPPR7590		\$0.00
				SURR SAVINGS	&		
			17.2.		ASOC AEELA 0113		\$19,066.88
	Examp ■ No			cly traded stocks ent accounts with bro	kerage firms, money market accounts		
19.	Non-pu joint v		stock and	interests in incorpo	rated and unincorporated businesses,	including an interes	t in an LLC, partnership, and
	■ No	0:		about the c			
	⊔ Yes.	Give specific i		about them me of entity:		% of ownership:	
20.	Negoti	able instrumen	nts include p	personal checks, casl	ciable and non-negotiable instruments niers' checks, promissory notes, and mon- nsfer to someone by signing or delivering		

D	ebtor 1	OSCAR O	RLANDO ESTELA RIVE	ERA	Case number (if known)	17-03133-BKT
	■ No	Give specific	information about them			
		•	Issuer name:			
21			ion accounts in IRA, ERISA, Keogh, 401	(k), 403(b), thrift savings acco	ounts, or other pension or profit-sharing	plans
	Yes.	List each acco	ount separately. Type of account:	Institution name:		
				RETIREMENT I	ELA	\$5,000.00
_						
22	Your s Examp	hare of all unu			ervice or use from a company as, water), telecommunications compar	nies, or others
	■ No □ Yes.			Institution name o	r individual:	
23	a. Annuit ■ No	ies (A contrac	ct for a periodic payment of r	money to you, either for life or	for a number of years)	
	☐ Yes		Issuer name and description	on.		
24	26 U.S.		ation IRA, in an account in 1), 529A(b), and 529(b)(1).	n a qualified ABLE program,	, or under a qualified state tuition pro	ogram.
	■ No □ Yes		Institution name and descr	iption. Separately file the reco	ords of any interests.11 U.S.C. § 521(c):	;
25	i. Trusts. ■ No	, equitable or	future interests in proper	ty (other than anything liste	ed in line 1), and rights or powers exe	ercisable for your benefit
	☐ Yes.	Give specific	information about them			
26				s, and other intellectual pro oceeds from royalties and lice		
	☐ Yes.	Give specific	information about them			
27	Examp ■ No	oles: Building			ngs, liquor licenses, professional licens	es
	☐ Yes.	Give specific	information about them			
IV	loney or	property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	3. Tax ref	funds owed t	o you			
	■ No □ Yes.	Give specific	information about them, incl	luding whether you already file	ed the returns and the tax years	
20) Family	support				
25	Examp ■ No	oles: Past due		sal support, child support, ma	intenance, divorce settlement, property	settlement
	⊔ Yes.	Give specific	information			
30		<i>bles:</i> Unpaid w	neone owes you vages, disability insurance p unpaid loans you made to s		ick pay, vacation pay, workers' comper	nsation, Social Security
	■ No □ Yes.	Give specific	: information			

De	ebtor 1	OSCAR ORLANDO ESTELA RIVERA	Case number (if known)	17-03133-BKT
		ets in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); credi	t, homeowner's, or renter's insurar	nce
		Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you a someo	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance polone has died. Give specific information	licy, or are currently entitled to rece	eive property because
	Examp ■ No	s against third parties, whether or not you have filed a lawsuit or made a ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	a demand for payment	
	■ No	contingent and unliquidated claims of every nature, including counterc	laims of the debtor and rights to	set off claims
	■ No	Give specific information		
36		the dollar value of all of your entries from Part 4, including any entries fart 4. Write that number here	. •	\$24,066.88
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any r	eal estate in Part 1.	
I	No. Go	own or have any legal or equitable interest in any business-related property? to Part 6. Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an ou own or have an interest in farmland, list it in Part 1.	Interest In.	
	■ No.	own or have any legal or equitable interest in any farm- or commercia Go to Part 7. Go to line 47.		
53.	Examp ■ No	Describe All Property You Own or Have an Interest in That You Did Not List Abuse other property of any kind you did not already list? Describe All Property You Own or Have an Interest in That You Did Not List Abuse the Abuse of the Property of any kind you did not already list? Describe All Property You Own or Have an Interest in That You Did Not List Abuse the Abuse of the Property You Own or Have an Interest in That You Did Not List Abuse the Abuse of the Property You Own or Have an Interest in That You Did Not List Abuse the Abuse of the Property You Own or Have an Interest in That You Did Not List Abuse the Abuse of the Property of any kind you did not already list? Describe All Property You Own or Have an Interest in That You Did Not List Abuse the Property of Abuse the Pro	ove	
54	. Add t	the dollar value of all of your entries from Part 7. Write that number here	e	\$0.00

Debtor 1 OSCAR ORLANDO ESTELA RIVERA	Case number (if known)	17-03133-BKT
--------------------------------------	------------------------	--------------

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$109,000.00
56.	Part 2: Total vehicles, line 5	\$321.00		
57.	Part 3: Total personal and household items, line 15	\$3,500.00		
58.	Part 4: Total financial assets, line 36	\$24,066.88		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$27,887.88	Copy personal property total	\$27,887.88
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$136,887.88

Fill in this inform				
Debtor 1	OSCAR ORLAND	O ESTELA RIVERA		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF PUERTO RICO		
Case number	17-03133-BKT			
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1 Which set of exemptions are you claiming? Check one only even if your shouse is filing with your

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	The second secon									
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.						
	1997 TOYOTA COROLLA 200000 miles	\$321.00		\$321.00	11 U.S.C. § 522(d)(2)					
	AUT., NO AIR, NO RADIO, NO CD, BODY DAMAGE, MOTOR FAIR Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	ref., stove, washer, bedrm set, 36 in	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)					
	flat screen tv, air condiitoner Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						
	clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)					
	Line IIIIII Scriedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit						
	RETIREMENT ELA	\$5,000.00		\$1,430.65	11 U.S.C. § 522(d)(12)					
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit						

Del	otor 1	OSCAR ORLANDO ESTELA RIVERA	Case number (if known)	17-03133-BKT
3.	•	rou claiming a homestead exemption of more than \$160,375? ect to adjustment on 4/01/19 and every 3 years after that for cases filed on or	r after the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 day	s before you filed this case?	
		□ No		

☐ Yes

Fill in this inform	ation to identify you	ir case.				
Debtor 1	OSCAR ORLAN First Name	DO ESTELA RIVERA Middle Name	Last Name			
Debtor 2	First Name	Middle Nose	Loot Nome			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	DISTRICT OF PUERTO RICC)			
Case number 1	7-03133-BKT					
(if known)						if this is an
					ameno	ed filing
Official Form	106D					
Schedule I	 D: Creditors	Who Have Claims	Secure	ed by Property	/	12/15
Be as complete and is needed, copy the number (if known).	accurate as possible.	If two married people are filing toget out, number the entries, and attach i	ther, both are	equally responsible for sup	oplying correct information	
_ `	_	nis form to the court with your othe	er schedules.	You have nothing else to	report on this form.	
_	all of the information	ŕ				
	Secured Claims	oolow.				
		more than one secured claim, list the cr	reditor senarate	Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	a particular claim, list the other creditors all order according to the creditor's nar	ors in Part 2. As		Value of collateral that supports this claim	Unsecured portion If any
2.1 ADM SISTI	EMA DE	Describe the property that secures	s the claim:	\$3,569.35	\$5,000.00	\$0.00
RETIRO Creditor's Name		\$111.22 MO., DUE 12/30/20				
		Trimes, 202 12/00/20				
PO BOX 42	TCY DIVISION 2003 I, PR 00940	As of the date you file, the claim is apply. Contingent	Check all that			
	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	ot? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as car loan)	s mortgage or s	secured		
Debtor 2 only		,				
Debtor 1 and Deb		☐ Statutory lien (such as tax lien, magnetised of Judgment lien from a lawsuit	echanic's lien)			
☐ Check if this cla	e debtors and another	Other (including a right to offset)	RETIREN	IENT FUNDS LOAN		
community deb		— Other (including a right to onset)				
Date debt was incu	rred <u>2014</u>	Last 4 digits of account num	mber <u>0873</u>	<u> </u>		
2.2 ASOC EMP	PLEADOS ELA	Describe the property that secures	s the claim:	\$25,387.56	\$19,066.88	\$6,320.68
Creditor's Name		SURRENDER				
	TCY DIVISION					
GPO BOX SAN JUAN		As of the date you file, the claim is	: Check all that			
00936-4508	•	apply. Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	at? Chack and	☐ Disputed Nature of lien. Check all that apply.				
_	. OHECK UIE.	An agreement you made (such as		secured		
■ Debtor 1 only ■ Debtor 2 only		car loan)	, mongage of S	Joodiou		
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, m	echanic's lien)			
	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community deb		Other (including a right to offset)	SURREN	DER SAVINGS & DIV	IDENDS	
Date debt was incu	rred 7-2015	Last 4 digits of account nun	mber 0113	}		

Debtor 1	OSCAR ORLANDO E	STELA RIVERA	Case number (if know)	17-03133-BKT	
	First Name Midd	e Name Last Name			
2.3 B A	ANCO POPULAR DE PR	Describe the property that secures the cla	aim: \$112,000.00	\$109,000.00	\$3,000.00
Cre	ditor's Name	\$867.00 MO., ARREARS \$7000.			
	ANKRUPTCY DIVISION				
SA	D BOX 366818 AN JUAN, PR 936-6818	As of the date you file, the claim is: Check apply. ☐ Contingent	all that		
Nun	nber, Street, City, State & Zip Code	_ ☐ Unliquidated			
Who ow	es the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debto □ Debto	•	An agreement you made (such as mortgacar loan)	age or secured		
☐ Debto	r 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
At leas	st one of the debtors and anothe	r			
	k if this claim relates to a munity debt	■ Other (including a right to offset) REL	LIEF FROM STAY		
Date deb	t was incurred 2005	Last 4 digits of account number	0485		

17-03133-RKT

\$140,956.91

Part 2: List Others to Be Notified for a Debt That You Already Listed

Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Debtor 1 OSCAP OPLANDO ESTELA PIVEDA

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this	information to identify your	case:				
Debtor 1		O ESTELA RIVERA				
Depioi i	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing	ng) First Name	Middle Name	Last Name			
United Sta	tes Bankruptcy Court for the:	DISTRICT OF PUERTO RICO				
Case num	ber 17-03133-BKT					
(if known)	17-03133-BK1				П	Check if this is an
					a	mended filing
Off: =: =1	Γο.::::: 4.00Γ/Γ					
	Form 106E/F		Ola:			40/45
		ho Have Unsecured e Part 1 for creditors with PRIORITY				12/15
left. Attach t		ured by Property. If more space is real figures. If you have no information to rep				
	creditors have priority unsecure					
_ `	Go to Part 2.	a olamo agamor you .				
☐ Yes.						
	List All of Your NONPRIORIT	Y Unsecured Claims				
	creditors have nonpriority unsec					
			our other och	dulaa		
□ No.	You have nothing to report in this p	art. Submit this form to the court with y	your otner sche	dules.		
■ Yes	-					
unsecui	red claim, list the creditor separately	aims in the alphabetical order of the of for each claim. For each claim listed, st the other creditors in Part 3.If you h	, identify what t	pe of claim it is. Do	not list claims already inc	cluded in Part 1. If more
						Total claim
4.1 J C	CP/GECRB	Last 4 digits of acco	ount number	7590		\$60.00
	npriority Creditor's Name	When was the debt	ima	2014		
	ANKRUPTCY DIVISION D BOX 960090	when was the dept	incurred?	2014		_
	RLANDO, FL 32896					
	ımber Street City State Zlp Code	As of the date you f	ile, the claim i	s: Check all that app	ly	
	no incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	—	IIY unsecured	ı cıaım:		
□ de	Check if this claim is for a comr		a out of a see-	ration agraement	divorce that you did not	
	the claim subject to offset?	report as priority clair		ration agreement of (aivorce mai you did not	
	No	☐ Debts to pension	or profit-sharin	g plans, and other sir	milar debts	
	Yes	Other. Specify	Credit Card			

Debte	or 1 OSCAR ORLANDO ESTELA RIVERA		Case number (if know) 17-	03133-BKT
4.2	PEP BOYS	Last 4 digits of account number	0981	\$579.00
	Nonpriority Creditor's Name SYNCHRONY BANK PO BOX 960061 Orlando, FL 32896	When was the debt incurred?	2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that yo	ou did not
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.3	SAM'S CLUB	Last 4 digits of account number	6504	\$852.22
	Nonpriority Creditor's Name PO BOX 530942	When was the debt incurred?	2014	
	ATLANTA, GA 30353-0942 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	d claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that yo	u did not
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.4	SEARS CARD	Last 4 digits of account number	4351	\$652.97
	Nonpriority Creditor's Name BANKRUPTCY DIVISION PO BOX 78051	When was the debt incurred?	2014	
	Phoenix, AZ 85062			
4.4	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that yo	u did not
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	I	
		· • <u> </u>		

Debtor	OSCAR O	ORLANDO ESTELA RIVERA		Case	number (if know)	17-03133-BK	T
4.5		RDS/SYNCB	Last 4 digits of account number	645	9	_	\$1,038.64
	Nonpriority Cre PO BOX 53	0949	When was the debt incurred?	201	5		
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Che	ck all that apply		
	■ Debtor 1 on	lv	☐ Contingent				
	Debtor 2 on	•	☐ Unliquidated				
		d Debtor 2 only	☐ Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim	:		
	_		☐ Student loans		-		
	debt	is claim is for a community	Obligations arising out of a separeport as priority claims	aration a	agreement or divorce t	that you did not	
	No	ibject to onset:	Debts to pension or profit-sharir	na plane	and other similar del	ote	
	■ No □ Yes		Other. Specify Credit Card	•	, and other similar der		
4.6	WALMART		Last 4 digits of account number	932	6		\$58.00
	Nonpriority Cre PO BOX 53	0927	When was the debt incurred?	201	4		
		GA 30353 City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Che	ck all that apply		
	_						
	Debtor 1 on	•	Contingent				
	Debtor 2 on		☐ Unliquidated				
		d Debtor 2 only	Disputed	-l -l-!	_		
	_	of the debtors and another	Type of NONPRIORITY unsecure	a ciaim	:		
	☐ Check if the debt	is claim is for a community	☐ Student loans		. "		
		bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration a	agreement or divorce t	that you did not	
	■ No		☐ Debts to pension or profit-sharir	ng plans	, and other similar del	ots	
	□Yes		■ Other Specify Credit Card	4			
			Other. Specify				
Part 3:	List Other	s to Be Notified About a Debt T	nat You Already Listed				
is tryi have	ing to collect from	you have others to be notified about om you for a debt you owe to someo creditor for any of the debts that you s in Parts 1 or 2, do not fill out or sul	ne else, list the original creditor in I listed in Parts 1 or 2, list the add	Parts	1 or 2, then list the c	ollection agency I	nere. Similarly, if you
Part 4:	Add the A	mounts for Each Type of Unsec	ured Claim				
	the amounts of of unsecured cla	certain types of unsecured claims. aim.	This information is for statistical r	eportin	g purposes only. 28	U.S.C. §159. Add	the amounts for each
					Total (Claim	
	6a. Total laims	Domestic support obligations		6a.	\$	0.00	
from F		Taxes and certain other debts you	owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal injur	y while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unsecur	ed claims. Write that amount here.	6d.	\$	0.00	_
	6e.	Total Priority. Add lines 6a through	6d.	6e.	\$	0.00	
					Total (Claim	
	6f.	Student loans		6f.	\$	0.00	
	Total laims						
from F	Part 2 6g.	Obligations arising out of a separ you did not report as priority clair		6g.	\$	0.00	
	6h.			6h.	\$	0.00	

6i.

Other. Add all other nonpriority unsecured claims. Write that amount

here.

6i.

3,240.83

Case number (if know)

17-03133-BKT

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **3,240.83**

Fill in this inform	nation to identify your			
Debtor 1	OSCAR ORLAND	O ESTELA RIVERA		
	First Name	Middle Name	Last Name	
Debtor 2				I
(Spouse if, filing)	First Name	Middle Name	Last Name	I
United States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO RICO		
Case number 1	17-03133-BKT			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	=
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

Fill in this	s information to identify you	r case:			
Debtor 1		DO ESTELA RIVERA			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
_					
Case num (if known)	ber 17-03133-BKT				Chook if this is an
(ii Kilowii)					Check if this is an amended filing
					amenaea ming
Officia	l Form 106H				
Scher	dule H: Your Co	debtors			12/15
Berie	dic II. Tour oo				12/13
1. Do	you have any codebtors? (I	f you are filing a joint case, o	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
	t hin the last 8 years, have yo na, California, Idaho, Louisian				ty states and territories include
	,,,	-,		,	
	. Go to line 3.				
☐ Yes	s. Did your spouse, former sp	ouse, or legal equivalent live	with you at the time?		
					g with you. List the person shown
					he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	olumn 2.	arronn root/r), or oched	ule G (Official I Offit II	oog, ose schedule b,	Schedule L/1 , or Schedule 3 to III
	Column 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedule	
					
3.1	Name			Schedule D, lin	
				☐ Schedule E/F, ☐ Schedule G, lin	
-				— Scriedale G, III	
	Number Street City	State	ZIP Code		
	o.i.y	Ciaio	2 0000		
				По	
3.2	Name			Schedule D, lin	
				☐ Schedule E/F, ☐ Schedule G, lin	
-					IC
	Number Street City	State	ZIP Code		

Fill	in this information to identify your ca	ase:							
Deb	otor 1 OSCAR ORI	ANDO ESTELA RIVE	RA		_				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	: DISTRICT OF PUER	TO RICO		_				
Cas	se number 17-03133-BKT					Check if this is:			
(If kr	own)		•			An amende	d filing		
_						A suppleme		g postpetition ollowing date:	
0	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/15
sup spo	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sith you, do not include	spouse is de inforn	s living nation a	with you, included in the with your spoot your spoot out your spoot out the with the	ude inform ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ling spouse	
	If you have more than one job,	Employment status	Employed			☐ Emplo	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			☐ Not er	mployed		
		Occupation	Policeman						
	Include part-time, seasonal, or self-employed work.	Employer's name	POLICE DEPAR	TMENT	OF PR	<u> </u>			
	Occupation may include student or homemaker, if it applies.	Employer's address	PO BOX 70166 San Juan, PR 00	0936					
		How long employed t	here? 4 YRS						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	eport for a	any line,	write \$0 in the	space. Incl	lude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mployer	s for that perso	n on the lin	nes below. If	you need
					Fo	r Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,444.50	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3		4	S	1 444 50	\$	N/A	

				For	Debtor 1		or Debtor 2 or on-filing spouse	
	Сору	line 4 here	4.	\$	1,444.50	\$	N/A	-
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	87.10	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	144.45	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	55.61	\$	N/A	_
	5e.	Insurance	5e.	\$	3.61	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	_
	5g.	Union dues	5g.	\$	52.51	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$ -	N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	343.28	\$_	N/A	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,101.22	\$_	N/A	_
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	-
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. 8g.	\$ \$_	0.00	\$ \$	N/A N/A	_
	8h.	Other monthly income. Specify: BONUS	8h.+	· —	49.00	· -	N/A	_
	OH.	Other monthly income. Specify.	_ 011.+	Ψ_	49.00	-Ψ_	IN/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	49.00	\$_	N/A	<u> </u>
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		1,150.22 + \$		N/A = \$	1,150.22
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						1,1001
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depen					0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident amount on the Summary of Schedules and Statistical Summary of Certailes						1,150.22
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				Combir monthly	ned y income
		No.						
		Yes. Explain:						

Fill	in this information to identify your case:				
Deb	otor 1 OSCAR ORLANDO ESTELA RIVERA		Chec	k if this is:	
Deh	otor 2		_	An amended filing	ing postpotition chapter
	ouse, if filing)			13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: DISTRICT OF PUERTO RICO		=	MM / DD / YYYY	
Cas	se number 17-03133-BKT				
(If k	(nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
Be	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.	re filing together, bo form. On the top of	oth are equa any addition	ally responsible fo nal pages, write y	r supplying correct our name and case
Par 1.	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household? ☐ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i>	s for Separate House	hold of Debt	or 2.	
2.	Do you have dependents? \square No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	DAUGHTER		2	■ Yes
		DAUGHTER		4	□ No ■ Yes
		<u>DAGGITER</u>		- -	■ res □ No
					☐ Yes
					□ No
2	Do your expenses include				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Par	tt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a supplicable date.				
Inc	lude expenses paid for with non-cash government assistance	if you know			
the	value of such assistance and have included it on Schedule I:			Your expe	enses
(01	ficial Form 106I.)			Tour oxpo	
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as he 	ome equity loans	4d. \$ 5. \$		0.00
٥.	Additional mortgage payments for your residence, such as in	onic equity loans	υ. ψ		0.00

6a. \$ 6b. \$ 6c. \$	0.00
6b. \$	
	0.00
6c. \$	
	120.00
6d. \$	0.00
7. \$	200.00
	0.00
·	60.00
·	60.00
11. \$	60.00
12 \$	260.00
·	
· —	60.00
14. \$	20.00
·	0.00
	0.00
15c. \$	0.00
15d. \$	18.00
	50.00
16. \$	0.00
17a ¢	0.00
·	
· —	0.00
	0.00
	0.00
	1,095.00
<u> </u>	· · · · · · · · · · · · · · · · · · ·
· —	0.00
	ne.
	0.00
	0.00
	0.00
· —	0.00
·	0.00
21. +\$	260.00
\$	2,263.00
106J-2 \$	
\$	2,263.00
23a \$	1,150.22
۷۵۵۵	2,263.00
23c. \$	-1,112.78
	increase or decrease because
	8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 15c. \$ 17d. \$ 17d

Fill in this in	nformation to identify your	case:			
Debtor 1	OSCAR ORLAND	O ESTELA RIVERA			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Case number	er 17-03133-BKT				
(if known)					eck if this is an ended filing
O(()	400D				
Official F	orm 106Dec				
Declar	ration About a	n Individual	Debtor's Sci	hedules	12/15
,	th. 18 U.S.C. §§ 152, 1341, 1 Sign Below	010, una 0071.			
Did yo	u pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No	0				
☐ Ye	es. Name of person			Attach Bankruptcy Petition Declaration, and Signature	
	penalty of perjury, I declare by are true and correct.	that I have read the sum	mary and schedules filed	d with this declaration and	
	OSCAR ORLANDO EST		X	2.1	
	SCAR ORLANDO ESTELA nature of Debtor 1	A KIVEKA	Signature of D	Jedior 2	
Dat	te May 9 2017		Date		

Fil	l in this infor	mation to identify you	r case:			
De	ebtor 1	OSCAR ORLAN	DO ESTELA RIVERA			
		First Name	Middle Name	Last Name		
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Ba	nkruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Ca	se number	17-03133-BKT				
	(nown)	17 00100 BIXT				heck if this is an mended filing
0	fficial Fo	orm 107				
_			Affairs for Individ	duals Filing for B	ankruptcy	4/16
info	ormation. If n		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Pa	rt 1: Give I	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married Not ma					
2.	During the	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Li	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. sta	Within the I tes and territor	ast 8 years, did you ev ies include Arizona, Ca	ver live with a spouse or leg	gal equivalent in a commun vada, New Mexico, Puerto R	ity property state or territory ico, Texas, Washington and W	r? (Community property isconsin.)
	■ No					
	☐ Yes. M	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Expla	in the Sources of You	r Income			
4.	Fill in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fi	ll in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,668.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$35,268.00	☐ Wages, commi bonuses, tips	issions,	
	☐ Operating a business		☐ Operating a bu	isiness	
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$35,351.00	☐ Wages, commi	issions,	
	☐ Operating a business		☐ Operating a bu	isiness	
 Did you receive any other income Include income regardless of whether and other public benefit payments; provincings. If you are filing a joint case List each source and the gross income. No Yes. Fill in the details. 	er that income is taxable. Exa pensions; rental income; intere e and you have income that y	imples of other income are all est; dividends; money collect ou received together, list it o	ed from lawsuits; ro nly once under Debt	yalties; and tor 1.	
	Dahtar 1		Dobtos 2		
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of incor Describe below.	ne	Gross income (before deductions and exclusions)
Part 3: List Certain Payments You	Made Before You Filed for E	3ankruptcy			
individual primarily for a During the 90 days before No. Go to line 7. Yes List below expaid that creation include part is subject to adjustment Yes. Debtor 1 or Debtor 2 or During the 90 days before No. Go to line 7. Yes List below expanding include payres.	ebtor 2 has primarily consupersonal, family, or household re you filed for bankruptcy, did ach creditor to whom you paid editor. Do not include payment payments to an attorney for thon 4/01/19 and every 3 years r both have primarily consure you filed for bankruptcy, did	mer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,425* or more in ts for domestic support oblighis bankruptcy case. after that for cases filed on mer debts. d you pay any creditor a total d a total of \$600 or more and	of \$6,425* or more'n one or more paymations, such as child or after the date of a of \$600 or more?	ents and th I support ar djustment. u paid that	e total amount you nd alimony. Also, do creditor. Do not
Creditor's Name and Address	Dates of paymen	nt Total amount	Amount you still owe	Was this pa	ayment for

7.	Insid of w	•	artners; relatives of any gene a control, or owner of 20% or	eral partners; partners more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
		No Yes. List all payments to an insider.					
	Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	insi	nin 1 year before you filed for bankrupt der? ude payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
		Yes. List all payments to an insider					
	Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	List	nin 1 year before you filed for bankrupt all such matters, including personal injury lifications, and contract disputes. No Yes. Fill in the details.					
		se title se number	Nature of the case	Court or agency		Status of th	ne case
10.		nin 1 year before you filed for bankrupt ck all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	Cre	editor Name and Address	Describe the Property		Date		Value of the property
			Explain what happened				ргоролту
11.	acco	nin 90 days before you filed for bankrup ounts or refuse to make a payment bed No Yes. Fill in the details.				i, set off any a	amounts from your Amount
	Cre	editor Name and Address	Describe the action the	creditor took	taker		Amount
12.		nin 1 year before you filed for bankrupt rt-appointed receiver, a custodian, or a No Yes		rty in the possess	ion of an assigne	e for the bene	efit of creditors, a
Par	t 5:	List Certain Gifts and Contributions					
13.	With ■ □	nin 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, did you give any gifts	with a total value	of more than \$60	0 per person	?
		ts with a total value of more than \$600 person	Describe the gifts		Dates the g	s you gave ifts	Value
		rson to Whom You Gave the Gift and dress:					

Official Form 107

Person Who Was Paid

Description and value of any property
transferred

Date payment
or transfer was
payment
made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you Description and value of property transferred

Describe any property or payments received or debts paid in exchange Date transfer was made

19.	within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		iny property to a	self-settle	ed trust or similar device	of which you are a
	■ No □ Yes. Fill in the details.					
	☐ Yes. Fill in the details. Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Depos	sit Boxes, and St	torage Unit	ts	
	Within 1 year before you filed for bankruptcy	/ were any financial a	occounts or instr	uments he	ald in your name, or for w	our henefit closed
20.	Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	r other financial acco	unts; certificates	s of deposi		, ,
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	or bankruptcy, a	ny safe de	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than you	ur home within 1	year befo	re you filed for bankrupto	;y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control t	for Someone Else				
23.	Do you hold or control any property that son for someone.	neone else owns? Inc	lude any proper	ty you bor	rowed from, are storing t	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Info	rmation				
For	the purpose of Part 10, the following definition	ons apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfa	ce water, ground			
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	as defined under any		law, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant,		s as a hazardous	s waste, ha	zardous substance, toxi	substance,

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24.	I. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?				
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of a	any release of hazardous material?		
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements a	and orders.
		No Yes. Fill in the details.			
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business		
27.	Witl	nin 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	business?
		A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time	
		A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)	
		☐ A partner in a partnership			
		☐ An officer, director, or managing exe	ecutive of a corporation		
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation		
		No. None of the above applies. Go to P	art 12.		
		Yes. Check all that apply above and fill	in the details below for each business	•	
		siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security	
	(Nu	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
28.		nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement t	o anyone about your business? Inclu	ıde all financial
		No Yes. Fill in the details below.			
		me dress mber, Street, City, State and ZIP Code)	Date Issued		

Debtor 1	OSCAR ORLANDO ESTELA RIVERA	Case number (if known)	known) 17-03133-BKT	
Part 12:	Sign Below			
l have read	I the answers on this Statement of Financial Affairs and any attachmen	its, and I declare under nen	alty of periury that the answers	
are true ar	d correct. I understand that making a false statement, concealing prop kruptcy case can result in fines up to \$250,000, or imprisonment for up	erty, or obtaining money or		
18 U.S.C. §	§ 152, 1341, 1519, and 3571.	•		

	.C. §§ 152, 1341, 1519,	•	1900; C. Implicatiniant for up to 20 yours, C. Both
/s/ OS	SCAR ORLANDO ES	TELA RIVERA	
	AR ORLANDO ESTE	LA RIVERA	Signature of Debtor 2
Date	May 9, 2017		Date
Did yo	u attach additional pag	es to Your Statement of	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay s	omeone who is not an a	nttorney to help you fill out bankruptcy forms?
■ No			
☐ Yes	. Name of Person	. Attach the Bankruptcy I	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your	case:		
Debtor 1	OSCAR ORLAND	O ESTELA RIVERA		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO RICO		
Case number 1	7-03133-BKT			
(if known)				Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

identify the creditor and the property that is collateral	secures a debt?	as exempt on Schedule C?
Creditor's ADM SISTEMA DE RETIRO	☐ Surrender the property.	□ No
name: Description of \$111.22 MO., DUE 12/30/2019 property securing debt:	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: PAYROLL DEDUCTION 	■ Yes
Creditor's ASOC EMPLEADOS ELA name: Description of SURRENDER property securing debt:	■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	■ No □ Yes
Creditor's BANCO POPULAR DE PR name: Description of \$867.00 MO., ARREARS \$7000. property	 ■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 OSCAR ORLANDO ESTELA RIVERA	Case number (if known)	11-03133-DN1
securing debt:		_
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Unex you may assume an unexpired personal property lease if the	pired leases are leases that are still in effect; the	lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I have indicated my in property that is subject to an unexpired lease.	ntention about any property of my estate that sec	cures a debt and any personal
X /s/ OSCAR ORLANDO ESTELA RIVERA OSCAR ORLANDO ESTELA RIVERA Signature of Debtor 1	X Signature of Debtor 2	
Date May 9, 2017	Date	

Fill in th	is information to identify your case:				directed in this form and	in Form
Debtor	OSCAR ORLANDO ESTELA RIVERA		122	2A-1Supp:		
Debtor (Spouse,				☐ 1. There is no pres	sumption of abuse	
	. ,	ina		2. The calculation	to determine if a presur	nption of abuse
United	States Bankruptcy Court for the: District of Puerto Ri	CO			made under <i>Chapter 7</i>	Means Test
Case n			.		ficial Form 122A-2).	
(if known)					t does not apply now be y service but it could ap	
				☐ Check if this is a	an amended filing	
Offic	ial Form 122A - 1					
Chai	oter 7 Statement of Your Curi	rent Mor	nthly Inc	ome		12/15
attach a case nur	mplete and accurate as possible. If two married people ar separate sheet to this form. Include the line number to wh nber (if known). If you believe that you are exempted from g military service, complete and file <i>Statement of Exempt</i> Calculate Your Current Monthly Income	nich the addition a presumption	nal information a of abuse becau	applies. On the top of a se you do not have pri	ny additional pages, writ marily consumer debts o	te your name and or because of
1. W	hat is your marital and filing status? Check one only	y.				
	Not married. Fill out Column A, lines 2-11.					
	Married and your spouse is filing with you. Fill out	both Columns	A and B, lines	2-11.		
	Married and your spouse is NOT filing with you. Y	ou and your s	spouse are:			
	\square Living in the same household and are not legal	ly separated. [Fill out both Col	lumns A and B, lines	2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	gally separated	d under nonban	kruptcy law that appli	es or that you and your	
101(1 the 6	the average monthly income that you received from all s 0A). For example, if you are filing on September 15, the 6-mo months, add the income for all 6 months and divide the total beso own the same rental property, put the income from that property.	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. If the am de any income amount m	ount of your monthly incom nore than once. For examp	ne varied during ble, if both
-				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).			\$	\$	
	3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$ 0.00 \$					
of fro an	I amounts from any source which are regularly pai you or your dependents, including child support. Im an unmarried partner, members of your household, d roommates. Include regular contributions from a spo ed in. Do not include payments you listed on line 3.	Include regular your depender	contributions nts, parents,	\$ 0.00	\$	
5. N e	et income from operating a business, profession, o	r farm				
			otor 1			
	oss receipts (before all deductions)	\$ 0.00				
	dinary and necessary operating expenses	-\$ 0.00	Cany have	Φ 0.00	c	
	et monthly income from a business, profession, or farm	1\$	Copy here ->	\$ 0.00	\$	
6. N e	et income from rental and other real property	Deh	otor 1			
<u></u>	coss receipts (before all deductions)	\$ 0.00				
	dinary and necessary operating expenses	-\$ 0.00				
İ	et monthly income from rental or other real property	*	Copy here ->	\$ 0.00	\$	
	, , , , , , , , , , , , , , , , , , , ,	¥		\$ 0.00	\$	
ı /. ini	terest, dividends, and royalties			<u> </u>		

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benef	it under					
	For you \$	0.0	00					
	For you \$ For your spouse \$							
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	nount received that was	s a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international a separate page and pu	ts or	\$	0.00	\$		
	•			Φ		Ψ		
	Total amounts from accounts account (Φ	0.00	Φ		
	Total amounts from separate pages, if any.		+	Φ	0.00	\$		
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	2,992.33	+ \$ _		= \$	2,992.33
							Total cu	rrent monthly
Part	2: Determine Whether the Means Test Applies to	o You					ilicome	
12.	Calculate your current monthly income for the year	Follow these steps:						
	12a. Copy your total current monthly income from line 1	11		Сору	line 11 l	nere=>	\$	2,992.33
	Multiply by 12 (the number of months in a year)						x 1:	
	12b. The result is your annual income for this part of the	e form				12b.	. \$3	5,907.96
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	PR						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp		in the separa			\$2	3,758.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	(1, There is n	o presum	ption of abuse	9.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pr	esumption of	abuse is	determined by	/ Form 122	2A-2.
Part								
	By signing here, I declare under penalty of perjury	that the information or	n this st	atement and i	n anv atta	achments is tri	ue and co	rrect
					u, uitt			
	X /s/ OSCAR ORLANDO ESTELA RIVERA OSCAR ORLANDO ESTELA RIVERA Signature of Debtor 1	<u> </u>						
	Date May 9, 2017							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Fill in this information to identify your case:					
Debtor 1 OSCAR ORLANDO ESTELA RIVERA					
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: District of Puerto Rico					
Case number (if known)	17-03133-BKT				

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

- 1. There is no presumption of abuse.
- \square 2. There is a presumption of abuse.
- ☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	1: Determine Your Adjusted Income	
1.	Copy your total current monthly income. Copy line 1	1 from Official Form 122A-1 here=> \$ 2,992.33
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	☐ Yes. Fill in \$0 for the total on line 3.	
3.	Adjust your current monthly income by subtracting any part of your household expenses of you or your dependents. Follow these steps:	
	On line 11, Column B of Form 122A–1, was any amount of the income yo expenses of you or your dependents?	u reported for your spouse NOT regularly used for the household
	No. Fill in 0 for the total on line 3.☐ Yes. Fill in the information below:	
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	Fill in the amount you are subtracting from your spouse's income
	, , , ,	\$
		_ <u> </u>
		\$
		\$
	Total.	\$0.00
		Copy total here=> \$0.00
4.	Adjust your current monthly income. Subtract line 3 from line 1.	\$ 2,992.33

Case number (if known)

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,378.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

49

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$
- 7b. Number of people who are under 65 X **3**
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 147.00 Copy here=> \$ 147.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 117
- 7e. Number of people who are 65 or older X **0**
- 7f. **Subtotal.** Multiply line 7d by line 7e. \$ ______ **0.00 Copy here=> +\$** _____ **0.00**
- 7g. Total. Add line 7c and line 7f Copy total here=>

147.00

Debtor 1

Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15.

Based on information from the	IRS, the U.S. Trustee	Program has divided the	IRS Local Standard for ho	ousing for
ا bankruptcy purposes into two	parts:			

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 568.00 in the dollar amount listed for your county for insurance and operating expenses.

- Housing and utilities Mortgage or rent expenses:
 - 9a. Using the number of people you entered in line 5, fill in the dollar amount 888.00 \$ listed for your county for mortgage or rent expenses.....
 - 9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
BANCO POPULAR DE PR	\$ 867.00

					Repeat this
-	•	0.07.00	рру	967.00	amount on
Total average monthly payment	\$	007.00 he	re=> -\$	867.00	line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage	04.00	Сору	04.00
or rent expense). If this amount is less than \$0, enter \$0	\$ 21.00	here=> \$	21.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

- 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.
 - ☐ 0. Go to line 14.
 - 1. Go to line 12.
 - 2 or more. Go to line 12.
- 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 250.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Official Form 122A-2

You may						
nicle 1	Describe Vehicle 1:					
Ownersh	ip or leasing costs using IRS Local Standard		\$	0.00		
_						
are contr	actually due to each secured creditor in the 60 mont		at			
Nan	ne of each creditor for Vehicle 1	Average monthly payment				
-NC	DNE-	\$				
	Total Average Monthly Payment	\$	Copy here => -\$		Repeat this amount on line 33b.	
	·	enter \$0.	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
nicle 2	Describe Vehicle 2:					
Ownersh	ip or leasing costs using IRS Local Standard		\$	0.00		
		Do not include costs fo	r			
Nan	ne of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
	·	enter \$0	. \$	0.00	Copy net Vehicle 2 expense here => \$	0.00
				fill in the	Public \$	0.00
also ded	uct a public transportation expense, you may fill in w	hat you believe is the ap				189.00
	You may more than icle 1 Ownersh Average Do not in To calculare contribankrupt Nan -NC Net Vehic Subtract Net Vehic Subtract Public tr Transport Addition also deducted the contribution of the contribu	You may not claim the expense if you do not make any loan of more than two vehicles. Incle 1 Describe Vehicle 1: Ownership or leasing costs using IRS Local Standard	You may not claim the expense if you do not make any loan or lease payments on the more than two vehicles. Describe Vehicle 1: Ownership or leasing costs using IRS Local Standard	You may not claim the expense if you do not make any loan or lease payments on the vehicle. In add more than two vehicles. It also be a considered to be a considered and two vehicles. Saverage monthly payment for all debts secured by Vehicle 1.	You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you more than two vehicles. In addition, you more than two vehicles. Describe Vehicle 1: Ownership or leasing costs using IRS Local Standard	You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the exmore than two vehicles. Itiele 1 Describe Vehicle 1: Ownership or leasing costs using IRS Local Standard

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 174.20 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 393.92 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00 term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 1,095.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 120.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.

Official Form 122A-2

Add lines 6 through 23.

24. Add all of the expenses allowed under the IRS expense allowances.

4,336.12

\$

otor 1	os	CAR ORLANDO EST	ELA RIVERA			Case number (if known)	17-03133-I	ЗКТ	
Add	itional	Expense Deductions	These are additional						
			Note: Do not include	any expen	ise allowances	listed in lines 6-24.			
25.	insura					ses. The monthly expense ly necessary for yourself, y		r	
	Health	insurance		\$	0.00				
	Disabi	lity insurance		\$	7.22				
	Health	savings account		+ \$	0.00				
]			
	Total			\$	7.22	Copy total here=>		\$	7.22
	Do you	u actually spend this total	amount?			J			
		No. How much do you a	actually spend?						
		Yes		\$					
26.	conting your h	ue to pay for the reasona	ble and necessary care our immediate family v	e and supp who is unab	ort of an elder ble to pay for s	e actual monthly expenses ly, chronically ill, or disable uch expenses. These expe 29A(b).	d member of	\$	0.00
27.						nses that you incur to main es Act or other federal laws			
	By law	, the court must keep the	nature of these expen	ses confid	ential.			\$	0.00
28.	Additi	onal home energy cost	s. Your home energy of	osts are in	cluded in your	insurance and operating e	xpenses on		
		believe that you have hon			an the home e	nergy costs included in exp	enses on line		
		ust give your case truste		ur actual ex	xpenses, and y	you must show that the add	itional	\$	0.00
29.	\$160.4		for your dependent cl			e monthly expenses (not m than 18 years old to attend			
		ust give your case truste d is reasonable and nece				ou must explain why the a	mount		
	* Subj	ect to adjustment on 4/01	/19, and every 3 years	after that f	for cases begu	in on or after the date of ad	justment.	\$	0.00
30.	higher		and clothing allowance	s in the IR	S National Sta	ctual food and clothing exp indards. That amount cann			
		d a chart showing the mattions for this form. This c				link specified in the separark's office.	ate		
	You m	ust show that the addition	nal amount claimed is	reasonable	and necessar	y.		\$	0.00
31.		nuing charitable contrib nents to a religious or cha				ntribute in the form of cash	or financial	+\$	25.00

Official Form 122A-2

Add lines 25 through 31.

32. Add all of the additional expense deductions.

32.22

Case number (if known)	17-03133-BKT

	debts that are secured by an inter	est in property that you own, including hor ines 33a through 33e.	ne mor	tgages, ve	hicle		
To	,	ayment, add all amounts that are contractually	due to	each secu	red		
I	Mortgages on your home:						verage monthly
3a. (Copy line 9b here					=> \$	867.00
1	Loans on your first two vehicles:						
3b. (Copy line 13b here					=> \$	0.00
						=> \$	0.00
	List other secured debts:						
ame of	each creditor for other secured debt	Identify property that secures the debt		inclu	paymen de taxes ance?		
					No		
Α	ADM SISTEMA DE RETIRO	\$111.22 MO., DUE 12/30/2019			Yes	\$	111.22
					No	*	
					Yes	c	
_				_ "	res	\$	
					No		
		_			Yes	+\$ _.	
		lines 33a through 33d	\$_		Yes 78.22	+\$ Copy total here=>	\$978.22
4. Are	any debts that you listed in line 33	lines 33a through 33d 3 secured by your primary residence, a veh support or the support of your dependents	icle,			Copy	\$ 978.22
4. Are or o	any debts that you listed in line 33	3 secured by your primary residence, a veh	icle,			Copy	\$ 978.22
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mu	3 secured by your primary residence, a veh support or the support of your dependents st pay to a creditor, in addition to the payment ession of your property (called the cure amount	icle,			Copy	\$ 978.22
4. Are or o	any debts that you listed in line 33 other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posses	3 secured by your primary residence, a veh support or the support of your dependents st pay to a creditor, in addition to the payment ession of your property (called the cure amount	icle,		78.22	Copy	\$ 978.22 Monthly cure amount
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posse Next, divide by 60 and fill in the of the creditor	3 secured by your primary residence, a veh support or the support of your dependents st pay to a creditor, in addition to the payment sistent of your property (called the <i>cure amount</i> e information below.	icle,	9 Total cu	78.22	Copy	Monthly cure
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posse Next, divide by 60 and fill in the of the creditor	3 secured by your primary residence, a veh support or the support of your dependents st pay to a creditor, in addition to the payment sistent of your property (called the <i>cure amount</i> e information below.	icle,	9 Total cu amount	78.22	Copy total here=>	Monthly cure
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posse Next, divide by 60 and fill in the of the creditor	3 secured by your primary residence, a veh support or the support of your dependents st pay to a creditor, in addition to the payment sistent of your property (called the <i>cure amount</i> e information below.	icle,	9 Total cu amount	78.22	Copy total here=>	Monthly cure
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posse Next, divide by 60 and fill in the of the creditor	Identify property that secures the debt	icle,	9 Total cu amount	78.22	Copy total here=>	Monthly cure amount
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posses Next, divide by 60 and fill in the of the creditor.	Identify property that secures the debt	icle, ?	9 Total cu amount	78.22	Copy total here=>	Monthly cure amount
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posses Next, divide by 60 and fill in the of the creditor.	as a priority tax, child support, or alimony -	icle, ?	9 Total cu amount	78.22	Copy total here=>	Monthly cure amount
4. Are or o	any debts that you listed in line 3: other property necessary for your solution. No. Go to line 35. Yes. State any amount that you mulisted in line 33, to keep posse Next, divide by 60 and fill in the of the creditor. E- you owe any priority claims such a past due as of the filing date of you not solve the possess of the filing date of you not solve the property of the creditor.	as a priority tax, child support, or alimony- our bankruptcy case? 11 U.S.C. § 507.	tal \$_	9 Total cu amount	78.22	Copy total here=>	Monthly cure amount

For more	eligible to file a case under Chapter 13? 11 U.S.C. § a information, go online using the link for Bankruptcy Bases for this form. Bankruptcy Basics may also be available.	s <i>ics</i> specifie				
■ No.						
☐ Yes.	Fill in the following information.					
	Projected monthly plan payment if you were filing under	er Chapter 1	13	\$		
	Current multiplier for your district as stated on the list i Administrative Office of the United States Courts (for c and North Carolina) or by the Executive Office for Unit (for all other districts).	districts in Al	labama rustees	х		
	To find a list of district multipliers that includes your district link specified in the separate instructions for this for the available at the bankruptcy clerk's office.				Сору	<i>ı</i> total
	Average monthly administrative expense if you were fi	iling under C	Chapter 13	\$		=> \$
	of the deductions for debt payment. es 33e through 36.					\$978.22
Total Deduc	ctions from Income					
38. Add all d	of the allowed deductions.					
	ne 24, All of the expenses allowed under IRS e allowances	\$	4,336.12	! _		
Copy lir	ne 32, All of the additional expense deductions	\$	32.22			
Copy lir	ne 37, All of the deductions for debt payment	+\$	978.22	_ !		
				_		
	Total deductions	\$	5,346.56	Copy total	here=>	\$ 5,346.56
Part 3: De	termine Whether There is a Presumption of Abuse					
39. Calculat	e monthly disposable income for 60 months					
	ppy line 4, adjusted current monthly income	\$	2,992.33	,		
	ppy line 38, <i>Total deductions</i>	· · · · · · · · · · · · · · · · · · ·	5,346.56	_		
335. 00	pp inte 30, rotal deductions	- p	3,340.30	<u>'</u>		
	onthly disposable income. 11 U.S.C. § 707(b)(2). ubtract line 39b from line 39a	\$	-2,354.23	Copy here=>\$	2	2,354.23
For the	next 60 months (5 years)				x 60	
					7	
39d. To	otal. Multiply line 39c by 60	39d	. \$	41,253.80	Copy here=>	\$141,253.80
40. Find out	whether there is a presumption of abuse. Check the	e box that ap	oplies:		_	
■ The	line 39d is less than \$7,700*. On the top of page 1 of t	his form, ch	eck box 1, The	ere is no presu	ımption of ab	use. Go to Part 5.
	line 39d is more than \$12,850*. On the top of page 1 c 4 if you claim special circumstances. Go to Part 5.	of this form,	check box 2, 7	There is a pres	umption of a	buse. You may fill out
☐ The I	line 39d is at least \$7,700*, but not more than \$12,85	i0*. Go to lin	ne 41.			
*Subject	to adjustment on 4/01/19, and every 3 years after that f	or cases file	d on or after t	he date of adju	ustment.	

41b. 2 Determine 25% of you	Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I) Multiply line 41a by 0.25	\$ x .25		
41b. 2 Determine 25% of you	A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I)	x .25	7	
41b. 2 Determine 25% of you	Schedules (Official Form 106Sum), you may refer to line 3b on that form. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I)	x .25	7	
41b. 2 N Determine 25% of you	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(I)		٦	
Determine 25% of you		\$		
Determine 25% of you		\$	1	
Determine 25% of you		IΨ	Copy here=>	\$
Determine 25% of you			11010_2	-
25% of you				
	e whether the income you have left over after subtracting all allowed dedu ur unsecured, nonpriority debt. box that applies:	ictions is enough to pa	ay	
Line 39	9d is less than line 41b. On the top of page 1 of this form, check box 1, <i>There</i> Part 5.	is no presumption of al	ouse.	
□ 1:no 2(Od in arrival to an many than line 44h. On the tan of your 4 of this farm, should	have O. Thana is a		
	9d is equal to or more than line 41b. On the top of page 1 of this form, check mption of abuse. You may fill out Part 4 if you claim special circumstances. The			
presum	inplion of abase. For may fill out 1 art 4 if you dialin special efformstations. The	ingo to i ait o.		
Give	Details About Special Circumstances			
item. You nece	n the following information. All figures should reflect your average monthly exp. You may include expenses you listed in line 25. must give a detailed explanation of the special circumstances that make the elessary and reasonable. You must also give your case trustee documentation of istments.	xpenses or income adju	stments	
Giv		verage monthly expensincome adjustment	se .	
RE	ETIREMENT FUND LOAN	\$ 111.	22	
		\$		
		\$		
		\$		
	Below			

OSCAR ORLANDO ESTELA RIVERA

Signature of Debtor 1

Date May 9, 2017
MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **POLICE DEPARTMENT PR**

Income by Month:

1110011100		
6 Months Ago:	11/2016	\$2,889.00
5 Months Ago:	12/2016	\$3,499.00
4 Months Ago:	01/2017	\$2,899.00
3 Months Ago:	02/2017	\$2,889.00
2 Months Ago:	03/2017	\$2,889.00
Last Month:	04/2017	\$2,889.00
	Average per month:	\$2,992.33

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Puerto Rico

Disclosure of compensation paid to me was: Debtor(s) Disclosure of compensation of the compensation paid to me was: Debtor(s) Disclosure of compensation to be paid to me was: Debtor(s) Debtor(s) Debtor(s) Chapter 7 Debtor(s) Chapter 7 Chapter 7 Chapter 7 Chapter 7 Debtor(s) Debtor(s) Chapter 7 Debtor(s) Debtor(s) Debtor(s) Chapter 7 Debtor(s) Debtor(s) Debtor(s) Debtor(s) Debtor(specify):	•
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and the compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rebe rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify): Debtor Other (specify):	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rebe rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due The source of the compensation paid to me was: Debtor Other (specify): Debtor Other (specify):	
Prior to the filing of this statement I have received \$ 1,000.00 Balance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify):	
Prior to the filing of this statement I have received \$ 1,000.00 Balance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify):	
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■ Debtor □ Other (specify): 3. The source of compensation to be paid to me is: ■ Debtor □ Other (specify):	
3. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): □	
■ Debtor □ Other (specify):	
_	
<u> </u>	
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of	of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.	law firm. A
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:	
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in ban b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 522(f)(2)(A) for avoidance of liens on household goods. 	filing of
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stany other adversary proceeding.	ay actions or
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the this bankruptcy proceeding.	debtor(s) in
May 9, 2017 /s/ EMILY DARICE DAVILA, ESQ	
Date EMILY DARICE DAVILA, ESQ	
Signature of Attorney EMILY D DAVILA LAW FIRM	
420 PONCE DE LEON AVE	
MIDTOWN SUITE 311	
San Juan, PR 00918 787 759-8090 Fax: 787 759-9620	
davilalaww@prtc.net	
Name of law firm	